Please type a plus sign (+) inside this box → [+]

PTO/SB/01 (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	15997RRUS01U
First Inventor	Lorne C. Hinz
Title	TIME ZONE BASED PHONE SERVICES
Express Mail Label No.	EV 047544402 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. [X] Fee Transmittal Form (e.g. PTO/SB/17) *(submit an original and a duplicate for fee processing)*
2. [ ] Applicant claims small entity status. See 37 CFR 1.27.
3. [X] Specification [Total Pages 43] *(preferred arrangement set forth below)*
   - -Descriptive title of the invention
   - -Cross Reference to Related Applications
   - -Statement Regarding Fed sponsored R&D
   - -Reference to sequence listing, a table, or a computer program listing appendix
   - -Background of the Invention
   - -Brief Summary of the Invention
   - -Brief Description of the Drawings *(if filed)*
   - -Detailed Description
   - -Claim(s)
   - -Abstract of the Disclosure
4. [X] Drawing(s) (35 U.S.C. 113) [Total Pages 6]
5. Oath or Declaration [Total Pages 2]
   a. [X] Newly executed (original or copy)
   Copy from a prior application (37 CFR 1.63 (d))
   b. [ ] *(for continuation/divisional with Box 18 completed)*
   i. [ ] DELETION OF INVENTOR(S)
   Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. [ ] Application Data Sheet. See 37 CFR 1.76
7. [ ] CD-ROM or CD-R in duplicate, large table or Computer Program *(Appendix)*
8. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
   a. [ ] Computer Readable Form (CRF)
   b. Specification Sequence Listing on:
   i. [ ] CD-ROM or CD-R (2 copies); or
   ii. [ ] paper
   c. [ ] Statements verifying identity of above copies

03916 U.S.PTO 10/676166 093003

ACCOMPANYING APPLICATION PARTS

9. [ ] Assignment Papers (cover sheet & documents(s))
10. [ ] 37 CFR 3.73(b) Statement *(when there is an assignee)* [ ] Power of Attorney
11. [ ] English Translation Document *(if applicable)*
12. [ ] Information Disclosure Statement (IDS)/PTO-1449 [ ] Copies of IDS Citations
13. [ ] Preliminary Amendment
14. [X] Return Receipt Postcard (MPEP 503) *(Should be specifically itemized)*
15. [ ] Certified Copy of Priority Document(s) *(if foreign priority is claimed)*
16. [ ] Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. [X] Other: USPTO Credit Card Pymt

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

[ ] Continuation [ ] Divisional [ ] Continuation-in-part (CIP) of prior application No: _____

Prior application information: Examiner _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

[ ] Customer Number or Bar Code Label [insert customer no. or attach bar code label here] or [ ] Correspondence address below

Name	James A. Harrison				
Address	P.O. Box 670007				
City	Dallas	State	TX	Zip Code	75367
Country	USA	Telephone	(214) 902-8100	FAX	(214) 902-8101

Name (Print/Type)	James A. Harrison	Registration No. (Atty/Agent)	40,401
Signature		Date	9/30/2003

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

Please type a plus sign (+) inside this box → [+]

PTO/SB/17 (11_00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

09/30/03 16519 U.S. PTO

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT	($) $978.00

Complete if Known	
Application Number	
Filing Date	
First Named Inventor	Lorne C. Hinz
Examiner Name	
Group Art Unit	
Atty Docket No.	15997RRUS01U

METHOD OF PAYMENT

1. [X] The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 502126

Deposit Account Name: Garlick Harrison & Markison

[X] Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

[ ] Applicant claims small entitty status. See 37 CFR 1.27

2. [X] **Payment Enclosed:**

[ ] Check [X] Credit card [ ] Money Order [ ] Other

FEE CALCULATION

1. BASIC FILING FEE

Fee Description	Fee Paid
Utility filing fee	750.00
Design filing fee	
Plant filing fee	
Reissue filing fee	
Provisional filing fee	
SUBTOTAL(1)	($) $750.00

2. EXTRA CLAIM FEES

Fee From Below

	Extra Claims			Fee Paid
Total Claims	28 -20** 8	X 18	=	144.00
Independent Claims	4 -3** 1	X 84	=	84.00
Multiple Dependent			=	

Fee Description

Claims in excess of 20

Independent claims in excess of 3

**Reissue independent claims over original patent

**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) ($) 228.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION *(continued)*

3.. ADDITIONAL FEES

Fee Description	
Surcharge-late filing fee or oath	
Surcharge- late provisional filing fee or or cover sheet	
Non-english specifications	
For filing a request for ex parte reexamination	
Requesting publication of SIR prior to Examiner action	
Requesting publication of SIR after Examiner action	
Extension for reply within first month	
Extension for reply within second month	
Extension for reply within third month	
Extension for reply within fourth month	
Extension for reply within fifth month	
Notice of Appeal	
Filing a brief in support of appeal	
Request for oral hearing	
Petition to institute a public use proceeding	
Petition to revive - unavoidable	
Petition to revive unintentional	
Utility Issue Fee (or reissue)	
Design Issue Fee	
Plant Issue Fee	
Petitions to the Commissioner	
Processing fee under 37 CFR 1.17(q)	
Submissions of Information Disclosure Stmt	
Recording each patent assignment per property (times number of properties)	
Filing a submission after final rejection (37 CFR 1.129(a))	
For each addtional invention to be examined (37 CFR 1.129(b))	
Request for Continued Examination (RCE)	
Request for expedited Examination of design application	
Other fee (specify) _____	
Reduced by Basic Filing Fee Paid **SUBTOTAL (3)**	$0.00

SUBMITTED BY

Complete *(if applicable)*

Name *(Print Type)*	James A. Harrison	Registration No. *(Attorney Agent)*	40,401	Telephone	(214) 902-8100
Signature				Date	9/30/2003

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231